## UNITED STATES PATENT & TRADEMARK OFFICE Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND					
1 Date of Request: 2 Serial/Patent # 10 5/9/5					
3 Please refund the following fee(s):		4 PAP		5 DATE FILED	6 AMOUNT
Filing					\$ /0000
Amendment					\$
Extension of Time			1		\$
Notice of Appeal/Appeal		100		<b>&gt;</b>	\$
Petition		He.			\$
Issue					\$
Cert of Correction/Terminal Disc.					\$
Maintenance					\$
Assignment					\$
Other					\$
		7 TOTAL AMOUNT \$ /00			
		8 TO BE REFUNDED BY:			
10 REASON:		Treasury Check			
Overpayment Jeach Fee		Credit Deposit A/C #:			
Duplicate Payment			9		
No Fee Due (Explanation):					
11 REFUND REQUESTED BY: [ Young ,					
TYPED/PRINTED NAME: Francise Young TITLE: Kerolegal					
SIGNATURE: PHONE:					
OFFICE:					
THIS SPACE RESERVED FOR FINANCE USE ONLY:					
APPROVED: DATE:					

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance Refund Branch Crystal Park One, Room 802B